		Effective December 8, 2004							.ko/	014	577-	7	
			CLAIL	FILED-PARTI			SMALL	EMITY.	<u> 10/016</u> MITTY		ER THAN		
İ		TOTAL CLAIMS			Cotumn 1)	(Cotumn 2)		TYPE		<b>□</b> of		SWALLENTIT	
		FOR			<del></del>			RATE	FEE		RATI	FEE	
	I				VA-BER FILED	MUMBER EXTR	<u> </u>	BASICA	EE 150.0	™ Of	Brace	300.0	
		TOTAL CHARGEABLE CLAIMS			minus 20=	•		XX 25:	•	OF	2550		
		INDEPENDENT CLAIMS			minus 3 •	•		X100=		OR	X200-		
		MULTIPLE DEPENDENT CLAIM PE			NT			+180=	1	7		+	
	ŀ	* If the difference in column 1 is I			han zero, enter	"O" in column 2	_ (	TOTAL	<del> </del>	JOR	<u> </u>		
			CLAIMS A	· (1		TOIAL	<u> </u>	TOH	TOTAL	L			
	-	7/31/01	6 (Column	1)	(Colum	n 2) (Column	3)	SMALL	ENTITY	OR		R THAN ENTITY	
-	AMENDMENTA		CLAIMS REMAININ AFTER AMENOME	iG	HIGHE HULEBE PREVIOU PAID FO	PRESENT	] [	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
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- [		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						71002		OR	X200=	<del> </del>	
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	₹	FIRST PRES	ENTATION OF I		DEPENDENT CU	NM []	X	100=		OR 2	(200=		
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-	(Column 1) (Column 2) (Column 3)											T	
0			CLAIMS REMAINING		HIGHEST MUMBER	PRESENT			-IOO			ADDI-	
E	L		AFTER LAMENDIKENT		PREVIOUSLY PAID FOR	EXTRA	, PV		ONAL FEE	F	IATE 1	FEE .	
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<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								01	` <b> </b>			
	H E	16 <del>62</del> 5 ў Р. С. — ,	164 Janes	converce	· · · · · · · · · · · · · · · · · · ·	ener:	1 418		jor	₹3	დ <u>-</u>		
The Topics Number Previously Paid for By This SPACE is her dun 20, actor 70. ADDIT FEE												<u> </u>	
	The	*Highest Numb	or Proviously Paid	For (Total o	d populary is 0	he highest number (	lound in t	he approfin	iele box in	column.	1	.	

Parent and Trademan Orion, U.S. DEPARTMENT OF COUNTRICE

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